

**Department of Public Health and Social Services**  
**Division of Environmental Health**  
**Food Establishment Inspection Report**

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|                    |                                     |                                     |        |   |           |  |               |
|--------------------|-------------------------------------|-------------------------------------|--------|---|-----------|--|---------------|
| INSPECTION         | RSN                                 | TYPE                                | GRADE  | INSPECTION DATE                                   |           | ESTABLISHMENT NAME   |               |
| Regular            |                                     | <input checked="" type="checkbox"/> | 10     | 01 / 18 / 2018                                    |           | LSG LUFTHANSA SERVICE GUAM INC.  |               |
| Follow-up          |                                     |                                     |        | TIME IN   | TIME OUT  | PERMIT HOLDER  |               |
| Complaint          | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | RATING | 10:30 AM  | 1:35 PM   | LSG LUFTHANSA SERVICE GUAM INC.  |               |
| Investigation      |                                     |                                     | A      | SANITARY PERMIT NO.                               |           | LOCATION (Address)   |               |
| Other:             |                                     |                                     |        | 170002561   |           | LOT 5165-1-2-3, LOT 5172-1-2, LOT 5172-1-3<br>HARMON, GUAM; RTE 10, GUERRERO ST. |               |
| ESTABLISHMENT TYPE |                                     |                                     |        | AREA  | TELEPHONE | No. of Risk Factor/Intervention Violations                                       | RISK CATEGORY |
| CATERING           |                                     |                                     |        | 3   | 048-5801  | 1  | 4             |
|                    |                                     |                                     |        | No. of Repeat Risk Factor/Intervention Violations |           |  |               |
|                    |                                     |                                     |        | 0   |           |  |               |

**FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS**

Circle designated compliance (IN, OUT, N/O, N/A) for each numbered item. Mark "X" in appropriate box for COS and/or R.

IN = In compliance OUT = Not in compliance N/O = Not observed N/A = Not applicable COS = Corrected on-site during inspection R = Repeat violation PTS = Demerit points

| Compliance Status                            |    |     |  | COS | R | PTS |
|--|----|-----|--|-----|---|-----|
| <b>Supervision</b>                           |    |     |  |     |   |     |
| 1  | IN | OUT | Person in charge present, demonstrates knowledge, and performance duties |     |   | 6   |
| <b>Employee Health</b>                       |    |     |  |     |   |     |
| 2  | IN | OUT | Management awareness: policy present                                     |     |   | 6   |
| 3  | IN | OUT | Proper use of reporting, restriction & exclusion                         |     |   | 6   |
| <b>Good Hygienic Practices</b>               |    |     |  |     |   |     |
| 4  | IN | OUT | N/A  | N/O |   | 6   |
| 5  | IN | OUT | N/A  | N/O |   | 6   |
| <b>Preventing Contamination by Hands</b>     |    |     |  |     |   |     |
| 6  | IN | OUT | N/A  | N/O |   | 6   |
| 7  | IN | OUT | N/A  | N/O |   | 6   |
| 8  | IN | OUT |  |     |   | 6   |
| <b>Approved Source</b>                       |    |     |  |     |   |     |
| 9  | IN | OUT |  |     |   | 6   |
| 10   | IN | OUT | N/A  | N/O |   | 6   |
| 11   | IN | OUT |  |     |   | 6   |
| 12   | IN | OUT | N/A  | N/O |   | 6   |
| <b>Protection from Contamination</b>         |    |     |  |     |   |     |
| 13   | IN | OUT | N/A  |     |   | 6   |
| 14   | IN | OUT | N/A  |     |   | 6   |
| 15   | IN | OUT |  |     |   | 6   |
| <b>Potentially Hazardous Food (TCS Food)</b> |    |     |  |     |   |     |
| 16   | IN | OUT | N/A  | N/O |   | 6   |
| 17   | IN | OUT | N/A  | N/O |   | 6   |
| 18   | IN | OUT | N/A  | N/O |   | 6   |
| 19   | IN | OUT | N/A  | N/O |   | 6   |
| 20   | IN | OUT | N/A  |     |   | 6   |
| 21   | IN | OUT | N/A  | N/O |   | 6   |
| <b>Consumer Advisory</b>                     |    |     |  |     |   |     |
| 22   | IN | OUT | N/A  |     |   | 6   |
| <b>Highly Susceptible Populations</b>        |    |     |  |     |   |     |
| 23   | IN | OUT | N/A  |     |   | 6   |
| <b>Chemical</b>                              |    |     |  |     |   |     |
| 24   | IN | OUT | N/A  |     |   | 6   |
| 25   | IN | OUT |  |     |   | 6   |
| <b>Conformance with Approved Procedures</b>  |    |     |  |     |   |     |
| 26   | IN | OUT | N/A  |     |   | 6   |

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health interventions are control measures to prevent foodborne illness or injury.

**GOOD RETAIL PRACTICES**

Good Retail Practices are preventative measures to control the introduction of pathogens, chemicals, and physical objects into foods.

Mark "X" in box: If numbered item is not in compliance and/or if COS and/or R. COS = Corrected on-site during inspection R = Repeat violation PTS = Demerit points

| Compliance Status                       |   |  |   | COS | R | PTS |
|---|---|--|---|-----|---|-----|
| <b>Safe Food and Water</b>              |   |  |   |     |   |     |
| 27                                      |   |  | Pasteurized eggs used where required  |     |   | 1   |
| 28                                      |   |  | Water and ice from approved source  |     |   | 2   |
| 29                                      |   |  | Variance obtained for specialized processing methods                                  |     |   | 1   |
| <b>Food Temperature Control</b>         |   |  |   |     |   |     |
| 30                                      |   |  | Proper cooling methods used; adequate equipment for temperature control               |     |   | 1   |
| 31                                      |   |  | Plant food properly cooked for hot holding  |     |   | 1   |
| 32                                      |   |  | Approved thawing methods used   |     |   | 1   |
| 33                                      | X |  | Thermometer provided and accurate   |     |   | 1   |
| <b>Food Identification</b>              |   |  |   |     |   |     |
| 34                                      |   |  | Food properly labeled; original container   |     |   | 1   |
| <b>Prevention of Food Contamination</b> |   |  |   |     |   |     |
| 35                                      | X |  | Insects, rodents, and animals not present   |     |   | 2   |
| 36                                      |   |  | Contamination prevented during food preparation, storage & display                    |     |   | 1   |
| 37                                      |   |  | Personal cleanliness  |     |   | 1   |
| 38                                      |   |  | Wiping cloths: properly used and stored   |     |   | 1   |
| 39                                      |   |  | Washing fruits and vegetables   |     |   | 1   |
| <b>Proper Use of Utensils</b>           |   |  |   |     |   |     |
| 40                                      |   |  | In-use utensils: properly stored  |     |   | 1   |
| 41                                      |   |  | Utensils, equipment and linens: properly stored, dried, handled                       |     |   | 1   |
| 42                                      |   |  | Single-use/single-service articles: properly stored, used                             |     |   | 1   |
| 43                                      |   |  | Gloves used properly  |     |   | 1   |
| <b>Utensils, Equipment and Vending</b>  |   |  |   |     |   |     |
| 44                                      | X |  | Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used |     |   | 1   |
| 45                                      |   |  | Warewashing facilities: installed, maintained, used; test strips                      |     |   | 1   |
| 46                                      |   |  | Nonfood-contact surfaces clean  |     |   | 1   |
| <b>Physical Facilities</b>              |   |  |   |     |   |     |
| 47                                      |   |  | Hot & cold water available, adequate pressure   |     |   | 2   |
| 48                                      |   |  | Plumbing installed; proper backflow devices   |     |   | 2   |
| 49                                      |   |  | Sewage and wastewater properly disposed   |     |   | 2   |
| 50                                      |   |  | Toilet facilities: properly constructed, supplied, & cleaned                          |     |   | 2   |
| 51                                      |   |  | Garbage/refuse properly disposed; facilities maintained                               |     |   | 2   |
| 52                                      |   |  | Physical facilities installed, maintained, and clean                                  |     |   | 1   |
| 53                                      |   |  | Adequate ventilation and lighting; designated areas use                               |     |   | 1   |

I have read and understand the above violation(s), and I am aware of the corrective measures that shall be taken.

|                                   |                                |
|-----------------------------------|--------------------------------|
| Person in Charge (Print and Sign) | Date:                          |
| Abelyn V. Raymundo                | 1 - 18 - 2018                  |
| DEH Inspector (Print and Sign)    | Follow-up (Circle one): YES NO |
| K. DEL MUNDO                      | Follow-up Date: 01/24/18       |



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## TEMPERATURE OBSERVATIONS

| ITEM NO. | OBSERVATIONS AND CORRECTIVE ACTIONS | CORRECT BY DATE |
|----------|-------------------------------------|-----------------|
|----------|-------------------------------------|-----------------|

AN INSPECTION WAS CONDUCTED IN RESPONSE TO COMPLAINT NO. 18-044B REGARDING COMPLAINANT OBSERVING ROACHES COMING OUT OF DELIVERY TRUCKS. THE FOLLOWING VIOLATIONS WERE OBSERVED:

Based on the inspection today, the items listed above identify violations which shall be corrected by the date specified by the Department. Failure to comply may result in the immediate suspension of the Sanitary Permit or downgrade. If seeking to appeal the result of any notice or inspection findings, a written request for hearing must be submitted to the Director within the period of time established in the notice for corrections.

Date: 07/18/18



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|   |   |   |
|---|---|---|
| ESTABLISHMENT NAME<br><b>LSG LUFTHANSA SERVICE GUAM, INC.</b> |   | LOCATION (Address) <b>HARMON, GUAM; RTE 16 GUERREDO ST.</b> |
| INSPECTION DATE<br><b>01 / 18 / 2018</b>                      | SANITARY PERMIT NO.<br><b>170002501</b> | PERMIT HOLDER<br><b>LSG LUFTHANSA SERVICE GUAM, INC.</b>    |

| ITEM NO. | OBSERVATIONS AND CORRECTIVE ACTIONS | CORRECT BY DATE |
|----------|-------------------------------------|-----------------|
|----------|-------------------------------------|-----------------|

Violations cited in this report must be corrected within the time frames indicated, or as stated in Sections 8-405.11 and 8-406.11 of the Guam Food Code.

|    |   |          |
|----|---|----------|
| 26 | IMPROPER TEMPERATURE BEING RECORDED FOR PHF/TCS FOOD TAKEN OUT OF BLAST CHILLER AND TRANSFERRED TO WALK-IN CHILLER AND NO MONITORING OF PHF/TCS FOOD NOT MEETING COLD HOLDING TEMPERATURES AFTER BLAST CHILLER CONDUCTED. TEMPERATURES TAKEN DURING INSPECTION WERE OVER 50°F, BUT LOGS INDICATE FOODS WERE LESS THAN 41°F. HACCP PLAN SHALL BE FOLLOWED AND LOGS ACCURATELY KEPT TO ENSURE PROCEDURES CONDUCTED FOLLOW APPROVED HACCP PLANS AND SAFE PRODUCTION OF FOOD. | 01/29/18 |
| 33 | THERMOMETERS FOR HOT HOLDING UNITS IN KITCHEN AND WALK-IN CHILLERS WERE INACCURATE OR UNOPERABLE; NO THERMOMETER IN BLAST CHILLER. THERMOMETERS SHALL BE PROVIDED AND <del>BE</del> ACCURATELY MEASURE AMBIENT TEMPERATURES TO ENSURE PROPER TEMPERATURES ARE MAINTAINED.   | 02/19/17 |
| 35 | OUTER OPENINGS AROUND DOORS TO THE OUTSIDE IN RECEIVING AREA AND LOADING/UNLOADING AREAS. OUTER OPENINGS SHALL BE SEALED OFF TO PREVENT THE PRESENCE OF PEST.   | 02/19/17 |
| 44 | BLUE CONTAINERS USED TO STORE DRY ICE TO BE USED FOR MAINTAINING FOOD TEMPERATURES FOR THE AIRLINES WITH CRACKS AND CHIPS. NON-FOOD CONTACT SURFACES SHALL BE FREE OF CRACKS AND CHIPS TO PREVENT CROSS-CONTAMINATION FROM OCCURRING.   | 02/29/17 |
|    | THE COMPLAINT WAS NOT OBSERVED DURING THE INSPECTION. PICTURES WERE TAKEN. REMOVED "A" PLACARD NO. 00580 ISSUED "A" PLACARD NO. 01980 BRIEFED ARLYN CALAS, MANAGER, ON ABOVE.   |          |

Based on the inspection today, the items listed above identify violations which shall be corrected by the date specified by the Department. Failure to comply may result in further regulatory actions. If seeking to appeal the result of this inspection, a written request for hearing must be submitted to the Director before the indicated correction date.

|   |                        |
|---|------------------------|
| Person in Charge (Print and Sign)<br><b>ARLYN CALAS</b> | Date: <b>7-18-2018</b> |
| DEH Inspector (Print and Sign)<br><b>K. DELMUNDO</b>    | Date: <b>01/18/18</b>  |